HENRY COUNTY PROBATION DEPARTMENT

Henry County Justice Center, 1215 Race Street, New Castle, IN 47362

Adult Probation Office, Suite 150

Juvenile Probation Office, Suite 160

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Esther Kaelin Tiffany Byers Jeremy Havens

Please find attached a copy of a "Verified Petition for Expungement of Juvenile Delinquency Records" form. As you have had a referral to the Henry County Probation Department, you do have a juvenile delinquency record with Henry County. Pursuant to Indiana Code 31-39.8, you have the right to petition the Court to have your juvenile records expunged (destroyed)

"Any person may petition a juvenile court at any time to remove from:

- (1) the court's files;
- (2) the files of law enforcement agencies; and
- (3) the files of any other person who has provided services to a child under a court order; those records pertaining to the person's involvement in juvenile court proceedings."

If you chose to petition the Court to consider expunging your juvenile records, then this form is to be used. The Court would then review your request and determine whether or not the Court should grant the request.

Susan Lightfoot Chief Probation Officer/JDAI Co-Coordinator Henry County Courts Henry County Probation Department 1215 Race Street, Suite 160 New Castle, IN 47362

STATE OF INDIANA))SS:		
HENRY COUNTY)	CAUSE 1	NO: -
IN THE MATTER OF THE EXPUNGEMENT (DELINQUENCY RECOI			_:
VERIFIED PETITION	FOR EXP	UNGEMENT OF JUVI RECORDS	ENILE DELINQUENCY
I,, state the Expungement of Juvenile D	ne followin Delinquency	g in support of this Ver Records filed pursuar	rified Petition for at to IC 31-39-8:
1. I was arrested for or cha expunge:	rged with t	he following delinquer	at acts that I am seeking to
[LIST OFFENSE]	[DATE C	OF ADJUDICATION]	[CASE/CAUSE NUMBER]
2. The allegation(s)/petitio	n(s) were f	iled in the	Court.
3. The law enforcement ag known.	ency emplo	oying the charging offic	cer is, if
4. I was born on		<u>.</u>	
5. My Social Security Nun	nber is	3.	_F
6. [Check one of the follow	ving.]		
· · · · · · · · · · · · · · · · · · ·	-	venile delinquency, chil the case(s) I am trying	ld in need of services, or to expunge.
	•	e delinquency, child in	need of services, or adult

[LIST OFFENSE]	[CASE/CAUSE NUMBER]	
	0	
Wherefore, I respectfully request the Courremoved from the files of the Court, all lar providers involved in my case[s].	rt order that all records, paper or electronic, be w enforcement agencies, and/or all service	
I also request that all paper records be desirecords be maintained by the Court on a se identification to the public or another persaccess said records.		
I affirm under penalties of perjury that the knowledge and belief.	above information is true to the best of my	
Respectfully submitted,		
Printed name	C:	
rrinted name	Signature	
Date		
I hereby certify that on the day of copy of this document was served upon ear Prosecuting Attorney of	, 20 a true and accurate ach party or attorney of record herein and to the County.	
Signature	_	